

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? 🗌 Yes 📈 No

(CFA-4)
Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

IS THIS AN AMENUMENT? Yes No		10	
COMMITTEE INFORMATION	1		
Full Name of Committee (as on Statement of Organization) Check if this is a new			
GREATER MOINNAPOUS REPUBLICAN	FINA	NE COMM	
2. Acronym or Abbreviated Name (if any)	_	nittee Telephone Number	
618900	(317	35-88	
4. Mailing Address (address where all campaign finance correspondence is received) 47 SOITH PENNSYLVANIA ST. SUITE 3		is a new address	
5. City, State, ZIP Code		Affiliation (if applicable)	
INDIAMAPOUS, IN 46204	DI	EPUBLICAN	
CANDIDATE INFORMATION (For Candidate's	Committee	es Only)	
7. Full Name of Candidate (include any nickname)	8. Party	Affiliation or If Independer	nt Candidate
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. Cour	nty of Residence	
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:		Check one:	
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conv	rention
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Outgoing Treasurer (within 10 days amend Statemen	nt of Organization)	Post-Con	vention
12. Reporting Period: From: 10/15/2011 Through: 12/31/261		COLUMN A This Period	COLUMN B Year to Date
13. Cash on hand and investments at the beginning of this reporting period.		49,197.31	
14. Cash on hand and investments January 1, current year.			125.66
CONTRIBUTIONS AND RECEIPTS			
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)			
15a. Itemized (use Schedule A)		21540,60	219,075.97
15b. Unitemized			6 782.59
15c. Add lines 15a and 15b in both columns	BTOTAL	21540.60	225, 858.52
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	TOTAL	70,737.91	225,984.22
EXPENDITURES			
(Note: These amounts include in-kind expenditures and loan repayments.)			
17a. Itemized (use Schedule B) (Public Question: use Schedule C)		5750 00	160,903.99
17b. Unitemized			92.32
17c. Add lines 17a and 17b in both columns	JBTOTAL	S 75000	160, 996-31
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	64,987.91	64,987.91
19. Debts OWED BY the committee (use Schedule D)			
20. Debts OWED TO the committee (use Schedule E)			
CEPTIFICATION			OR OFFICE USE ONLY
CERTIFICATION		^	A

CER	TIFICATION	
I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BES	T OF MY KNOWLEDGE AND BELIEF IT IS TR	UE, CORRECT AND COMPLETE.
Signature of Treasurer	Title	Date/1/20/12
Signature of Candidate (if applicable)		Date

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

for office use only Charlet d White

JAN 20 2012

FILED



State Form 4806 (R13/11-05)
Indiana Election commission (IC 3-9-5-14)

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all Information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income)DVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER	*****
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the calendar year. Otherwise, this is optional.				
CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1 Jason Sondhi 620 Mayfair Ln Carmel IN 46032	Other Receipt:	100.00	100.00	10/17/2011
				Treasurer
Contributor's Occupation (if required): Other - Political Worker				
Norman H. Stuart 9120 Fawn Lake Drive Indianapolis IN 46278	Other Receipt:	100.00	100.00	10/17/2011
				Treasurer
Contributor's Occupation (if required): Other -				
3 Ernie Shearer 3145 Cherry Lake rd Indianapolis IN 46235	Other Receipt:	25.00	25.00	11/03/2011
Contributor's Occupation (if required): Other -				Treasurer
Contributor's Occupation (il required). Other -				
4 Jason Sondhi 620 Mayfair Ln Carmel IN 46032	Other Receipt:	100.00	200.00	11/17/2011
				Treasurer
Contributor's Occupation (if required): Other - Political Worker				
5 Norman H. Stuart 9120 Fawn Lake Drive Indianapolis IN 46278	Other Receipt:	100.00	200.00	11/17/2011
				Treasurer
Contributor's Occupation (if required): Other -				
SUB TOTAL 1	THIS PAGE OF SCHEDULE A	\$ 425.00		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM 15a	ON THE LAST PAGE ONLY a of the Summary Sheet)	\$		



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uie i	calendar year. Otherwise, this is optional.				
	CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1	JCB Insurance Ltd. 60 Highland Manor Court South Indianapolis IN 46228	Other Receipt:	1,000.00	1,000.00	11/22/2011
					Treasurer
Con	tributor's Occupation (if required): Other -	and the second s		on the state of	
2	P. E. MacAllister P.O. Box 1941 Indianapolis IN 46206	Other Receipt:	5,000.00	5,000.00	11/28/2011
					Treasurer
Con	tributor's Occupation (if required): Other - Executive				
3	Ernie Shearer 3145 Cherry Lake rd Indianapolis IN 46235	Other Receipt:	25.00	50.00	12/05/2011
					Treasurer
Con	tributor's Occupation (if required): Other -				
4	Norman H. Stuart 9120 Fawn Lake Drive Indianapolis IN 46278	Other Receipt:	100.00	300.00	12/15/2011
					Treasurer
Con	tributor's Occupation (if required): Other -				
5	Jason Sondhi 620 Mayfair Ln Carmel IN 46032	Other Receipt:	100.00	300.00	12/15/2011
					Treasurer
Con Wor	tributor's Occupation (if required): Other - Political ker				
	SUB TOTAL	THIS PAGE OF SCHEDULE A	\$ 6,225.00		
	TOTAL OF ALL PAGES OF SCHEDULE		\$		
	/ Enter total on Hem 15	a of the Summary Sheet)	·		



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the o	calendar year. Otherwise, this is optional.				
	CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED
1	Dan Kelley, Jr. 1535 Northwood Dr. Indianapolis IN 46240	Other Receipt:	250.00	250.00	12/20/2011
Con	tributor's Occupation (if required): Other -				Treasurer
2	James L. Petersen 11827 Sea Star Dr. Indianapolis IN 46256	Other Receipt:	400.00	400.00	12/20/2011
Con	tributor's Occupation (if required): Other - Attorney				Treasurer
3	ADAM ARCENEAUX 1028 PINE HILL WAY CARMEL IN 46032	Other Receipt:	100.00	100.00	12/20/2011
Con	tributor's Occupation (if required): - INDIVIDUAL				Treasurer
4	Dave Mallon 11204 Lakeshore Dr. E Carmel IN 46033	Other Receipt:	450.00	450.00	12/20/2011
Con	tributor's Occupation (if required): - Attorney				Treasurer
5	Dave Mattingly 3820 Claybrook Ct. Bargersville IN 46106	Other Receipt:	500.00	500.00	12/20/2011
Con	tributor's Occupation (if required): - Attorney				Treasurer
	SUB TOTAL	THIS PAGE OF SCHEDULE A	\$ 1,700.00		
	TOTAL OF ALL PAGES OF SCHEDULE / (Enter total on ITEM 15	A ON THE LAST PAGE ONLY a of the Summary Sheet)	\$		



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	CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1	Jenifer Brown 4727 Blackstone Drive Indianapolis IN 46237	Other Receipt:	300.00	300.00	12/20/2011
					Treasurer
Cor	stributor's Occupation (if required): Other -				
	SUB TOTAL THIS PAGE OF SCHEDULE A		\$ 300.00		
	TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)		\$ 8,650.00		



State Form 4606 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar yearMUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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Pai	y committee).				
	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1	Chicago Testing Laboratory, Inc.	Other Receipt:	450.00	450.00	10/17/2011
					Treasurer
2	RightCHOICE Managed Care, Inc. PO Box 68086 Cincinnati OH 45206	Other Receipt:	1,000.00	1,000.00	10/19/2011
					Treasurer
3	E & A Industries, Inc. 101 West Ohio Street, Suite 1350 Indianapolis IN 46204	Other Receipt:	5,000.00	5,000.00	11/04/2011
					Treasurer
4	Parsons, Cunningham & Shartle Engineers, Inc. 46 S. Tennessee St. Danville IN 46122	Other Receipt:	100.00	100.00	11/28/2011
					Treasurer
5	Fleis & Vandenbrink Engineering 140 Washington Pointe Drive, Suite C Indianapolis IN 46229	Other Receipt:	167.00	167.00	12/08/2011
					Treasurer
	SUB TOTAL TI	HIS PAGE OF SCHEDULE A	\$ 6,717.00		
	TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM 15a		\$ 6,717.00		



State Form 4606 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE Please type or print legibly IN BLACK (INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM152 of the Summary Sheet. All cumulative contributions from political action committees

OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of the amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income)OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1	Wine & Spirits Wholesalers of Indiana PAC 135 N Pennsylvania St., Suite 1175 Indianapolis IN 46204	Other Receipt:	500.00	500.00	10/28/2011 Treasurer
2	TelPAC Indiana 54 Monument Circle Suite 200 Indianapolis IN 46204	Other Receipt:	500.00	500.00	12/20/2011 Treasurer
	SUB TOTAL TI TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM 15a		\$ 1,000.00 \$ 1,000.00		



State Form 4606 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM15a of the Summary Sheet. All cumulative contributions from other entitiesOVER \$100 per contributor, within a calendar yearMUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of the amount from candidate's, legislative caucus, and regular party committeesMUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income)OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1	Shrewsberry & Associates, LLC 7321 Shadeland Station, Suite 160 Indianapolis IN 46256	Other Receipt:	650.00	650.00	10/27/2011
	no a servicio e estado e entra de contra de co			··· -	Treasurer
2	Elrod & Mascher LLC 5329 S. Emerson Avenue, Suite C Indianapolis IN 46237	Other Receipt:	2,500.00	2,500.00	10/27/2011
		·			Treasurer
3	Ice Miller LLP One American Square, Box 82001 Indianapolis IN 46282-0002	Other Receipt:	175.00	175.00	12/20/2011
į					Treasurer
4	Ice Miller LLP One American Square, Box 82001 Indianapolis IN 46282-0002	Other Receipt:	500.00	675.00	12/20/2011
					Treasurer
5	Ice Miller LLP One American Square, Box 82001 Indianapolis IN 46282-0002	Other Receipt:	300.00	975.00	12/20/2011
					Treasurer
		HIS PAGE OF SCHEDULE A	\$ 4,125.00		
	TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM 15a		\$		



State Form 4606 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM152 of the Summary Sheet. All cumulative contributions from other entitiesOVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of the amount from candidate's, legislative caucus, and regular party committeesMUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income)OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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MUST be itemized on	this schedule (over \$200 if regular party committee).				
	UTOR'S FULL NAME AND FULL MAILING ADDRESS reet, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
	LLP rican Square, Box 82001 lis IN 46282-0002	Other Receipt:	225.00	1,200.00	12/20/2011
					Treasurer
	LLP rican Square, Box 82001 lis IN 46282-0002	Other Receipt:	375.00	1,575.00	12/20/2011
					Treasurer
	LLP rican Square, Box 82001 lis IN 46282-0002	Other Receipt:	200.00	1,775.00	12/20/2011
					Treasurer
4 Ice Miller One Ame Indianapo	LLP rican Square, Box 82001 lis IN 46282-0002	Other Receipt:	225.00	2,000.00	12/20/2011
					Treasurer
	SUB TOTAL THIS PAGE OF SCHEDULE A TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)				



(CFA-4 SCHEDULE B) Itemized Expenditures

State Form 4606 (R13/11-05)
Indiana Election commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind regardless of amount pald to political committees (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code: Missing 1 Brian Bash, TR Fair Finance Co. 1900 E. 9th St. Ste:3200 Clevland OH 44114	Other	Direct Purpose:	5,750.00	5,750.00	12/15/201
TOTAL OF	ALL PAGES OF SCHEDULE B ON	S PAGE OF SCHEDULE B N THE LAST PAGE ONLY a of the Summary Sheet)	<u> </u>		